UCSF newsbreak

NEWS FOR THE UCSF CAMPUS COMMUNITY VOL. 13, NO. 23 NOVEMBER 13, 1998

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CHRIS T. ANDERSON

Retail store ribbon-cutting

Celebrating the Nov. 4 opening of the Friend to Friend boutique, a store designed exclusively for people who are battling cancer, are, from left, Chris Wilhite, store manager and breast cancer survivor; Karen Wener, cancer survivor and immediate past president of the UCSF/Mount Zion Auxiliary; Laura Esserman, director of the UCSF Carol Franc Buck Breast Care Center, part of UCSF Stanford Health Care; and Cathryn Sampson Hilliard, auxiliary president. Located at the UCSF Cancer Center at the UCSF/Mount Zion Medical Center, the shop is open weekdays from 9:30 a.m. to 5:30 p.m. See story on page 5.

UCSF Stanford Health Care posts first-year results

UCSF Stanford Health Care marked its first anniversary as a merged organization — a year that has brought growing pains along with progress.

Acknowledging some of the pitfalls, Jackie Boyden, vice dean, UCSF School of Medicine, says, however, that based on the two overriding principles that drove the merger — preserving the viability of UCSF's clinical enterprise and protecting the academic missions of the schools of medicine, dentistry, nursing and pharmacy — the "merger has been successful."

Agreeing that the first year has been a "little rocky on occasion," overall the organization is "performing relatively effectively," says Bill Kerr, chief operating officer.

The private nonprofit organization has exceeded its projected $21 million bottom line, largely because its four hospitals have cared for more than 58,000 patients, a nearly 6 percent increase from the previous year. The first year saw $38 million in savings related to the merger, $20 million of which was due to decreased cost from joint purchasing and reductions in administrative overhead.

Since UCSF and Stanford's hospitals are located 40 miles apart, patient care has not been consolidated at one or another site, but rather, physicians are beginning to work together to identify the best practices and ensure that patients can access the most advanced treatments at any of the organization's sites.

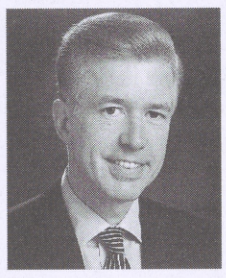
"The merger has made us stronger and allowed us to focus on what we do best, translating cutting-edge research into improvements in patient care," says Peter Van Etten, president and CEO of UCSF Stanford. "At the one year mark, we have made significant progress in integrating our operations and have built an infrastructure that is allowing physicians to collaborate on improving clinical services."

Under the Lucile Packard Children's Health Services umbrella, a combined team of surgeons, led by UCSF's Michael Harrison, the newly appointed director of pediatric surgery, has developed a minimally invasive procedure to treat Hirschprung's disease, a life-threatening bowel disorder that affects infants. The innovation allows physicians to correct

(SEE USHC ON PAGE 3)

Campus considers impact of midterm election

BY LISA CISNEROS



Davis

While campus reaction to last Tuesday's election ran the gamut from apathy to ecstasy, most of those interviewed were generally happy with the outcome.

University officials hailed the passage of Proposition 1A, the bond measure passed by voters to invest $9.2 billion to build, expand and repair public education facilities. UCSF will get $21.4 million to help pay for construction of the first building at its planned biomedical research campus Mission Bay and to upgrade its chilled water system in laboratory buildings on Parnassus.

"The passage of Prop 1A is a powerful affirmation by the people of California that they believe in the vital importance of public education," says Chancellor Mike Bishop.

It came as good news to most that California voters chose to elect Gray Davis as governor and re-elect US Senator Barbara Boxer and state schools chief Delaine Eastin.

"I'm pleased about the election of Gray Davis and BarbaraBoxer," said Amy Levine, director of the Center for Gender Equity. "I'm all for candidates who are pro-choice, pro-women, pro-education and pro-human rights."

Says Mary Anne Koda-Kimble, dean of the School of Pharmacy, "From a personal level, I am relieved that Barbara Boxer prevailed. She has been particularly courageous in speaking out on many issues critical to women, children and society and was a strong advocate for many issues important to the University, including augmentation of the National Institutes of Health budget."

The election of Davis, the first Democrat to win the state's highest office in 16 years, is seen as a triumph for education.

"The people of California have indicated that they prefer a more

(SEE REACTION ON PAGE 6)

New governor could reshape Board of Regents

Governor-elect Gray Davis might have the opportunity to appoint 10 new regents during his four-year term: five within his first few months in office and an additional five whose terms are set to expire within the next four years.

The board is composed of 18 appointed regents, seven ex-officio members and one student regent.

If the state senate does not confirm by January the two regental appointments Governor Wilson made this year — Regents Russell Gould and Joanne Kozberg — Davis has the option of filling these seats with his own appointees, according to UC spokesperson Terry Lightfoot.

Also, three seats are currently empty after they were temporarily filled on the eve of the Regents' vote on domestic partner benefits last November. Ralph Ochoa, John Hotchkis and Carol Chandler recently resigned from their temporary seats on the board to make themselves eligible for full 12-year terms after a new governor was elected.

Although it states in their bylaws that the appointment of Regents should be free of partisan interests, the process has been known to become politicized. Last November, Wilson's 11th-hour appointees — two Republicans and one Democrat — all voted with him against granting domestic partner benefits to UC employees. It's unknown whether Davis, who voted in favor of offering domestic partner benefits, will re-appoint them.

In addition to these seats, five appointed regents will see their terms expire within the next four years: Frank W. Clark Jr. in 2000, Meredith J. Khachigian and Howard H. Leach in 2001, and William T. Bagley and S. Sue Johnson in 2002.

PAULA MURPHY

Orchestra begins tenth season tomorrow

The UCSF Orchestra begins its tenth season tomorrow with veteran musician Stephen Paulson at the helm of the 70-piece ensemble.

A 21-year principal bassoonist of the San Francisco Symphony, Paulson is the newly appointed music director of the UCSF Orchestra, whose players are from UCSF and the community at large.

Paulson will lead his inaugural season with the orchestra on Saturday, Nov. 14, at 8 p.m. at St. Gregory's Episcopal Church, 500 DeHaro Street. Another performance is scheduled for Sunday, Nov. 15, at 2 p.m. at Millberry Union on UCSF's Parnassus campus.

For his debut as conductor, Paulson has planned a program which, he says, "pulls no punches when it comes to emotional intensity."

The concert programs will feature Bach's Brandenburg Concerto No. 1, Samuel Barber's Adagio for Strings and Tchiakovsky's Symphony No. 4.

The son of classical music lovers, Paulson credits the public school music program in his hometown on Long Island for cultivating his interest in making music. "I have music in my blood," he says. "The sound was very familiar to me growing up."

Tickets for this weekend's concerts are priced at $10 for general admission and $5 for student with valid identification.

For more information on the UCSF Orchestra, call 392-9202 or visit the orchestra's website at (www.itsa.ucsf.edu/~lder).

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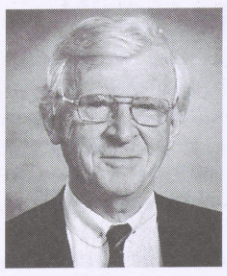
Lee honored for health care work



Lee

Former UCSF Chancellor Philip R. Lee received a national honor at the Association of American Medical Colleges (AAMC) 109th annual meeting on Oct. 31 in New Orleans.

Lee is the 1998 recipient of the David E. Rogers award, co-sponsored by the AAMC and the Robert Wood Johnson Foundation, for major contributions to improving health and the health care of the American people.

Lee currently serves as senior advisor to the School of Medicine and professor emeritus at UCSF. From 1993 through January 1997, he served as Assistant Secretary for Health in the US Department of Health and Human Services.

Before going to Washington, Lee was the Director of the Institute for Health Policy Studies, which he founded at UCSF in 1972. He served as chancellor of UCSF from 1969 to 1972, was Assistant Secretary for Health and Scientific Affairs in the Department of Health, Education, and Welfare from 1965 to 1969, and was Director of Health Services in the Agency for International Development from 1961 to 1965.

In addition to his official government service, Lee has frequently been an advisor to federal, state, and local health policymakers, and has served on numerous advisory boards and planning groups. He was president of the Health Commission for the City and County of San Francisco from January 1985 to January 1989, and from July 1986 through February 1993 he served as Chair of the Physician Payment Review Commission, established by the US Congress.

A native of San Francisco, Lee received his MD from Stanford in 1948 and an MS from the University of Minnesota in 1955. While at UCSF, his research and teaching endeavors in the field of health policy have focused on the quality of access to health care, physician payment, prescription drugs, reproductive health policy, and AIDS-related issues. Throughout his career, he has served (officially and unofficially) as advisor and mentor for countless fellows and students who have gone on to important policy-making positions in government, academia, and the private sector.

The AAMC represents the 125 accredited US medical schools; the 16 accredited Canadian medical schools; about 400 major teaching hospitals, including 74 Veterans Affairs medical centers; 87 academic and professional societies representing 88,000 faculty members; and the nation's 67,000 medical students and 102,000 medical residents.

CHRIS T. ANDERSON

Sharing the wealth

UCSF's Science and Health Education Partnership (SEP) kicked off its 12th year of creating science outreach programs for San Francisco public school students and teachers on Oct. 14.

SEP is an extensive collaboration between UCSF and the San Francisco Unified School District (SFUSD) to support improvement in the quality of science education for all students in the city's public schools. Since 1987, the partnership has worked to provide teachers with access to UCSF's material resources, place UCSF volunteer students and scientists in classrooms and support SFUSD science programs.

Above, SEP volunteer Ian Megne, right, a post doc fellow in neurology and physiology, gives a boiling flask to Al Sefl, Mission High School's physics teacher. Sefl says most of his instruction equipment comes from SEP and allows his students to have hands-on learning experiences in science.

Kilpatrick participates in national leadership program

Sarah Kilpatrick, associate professor and director of obstetrics at UCSF, was recently selected to participate in the fourth class of the Hedwig van Ameringen Executive Leadership in Academic Medicine (ELAM) Program for Women.

ELAM was founded in 1993 by a friend of Allegheny University of the Health Sciences and is named after the benefactor's mother. It is the only in-depth national program that prepares women faculty for senior leadership positions at academic health centers.

The program's principal aims are to increase the success of senior women faculty in seeking leadership positions, such as department chair, associate dean, dean, vice president and president, and to increase the number of women leaders at academic health centers.

Currently, only nine of the 125 medical schools in the US are headed by women deans, and just one of the nation's 55 dental schools has a woman dean.

Kilpatrick completed the first ELAM session in September which focused on leadership skills and issues. The eight-day workshop also addressed financial issues associated with academic medical centers and how to maximize budgets in a changing health care world, Kilpatrick said.

"The session was excellent and it was very inspiring to interact with high-powered women in academic medicine, both those who led the sessions and those who participated," she said.

The 1998-99 class includes women from 31 medical and dental schools in the US and Canada. To date, half of all US medical schools have had women faculty participate in the year-long fellowship, which focuses on the skills, perspectives and knowledge necessary for effective management in academic health centers in the 21st century. The program is also designed to address specific issues for women as they pursue senior leadership positions.

Only 10 percent of women faculty are full professors, according to the Association of American Medical Colleges. This paucity of women faculty at the top impacts the public because fewer women leaders in medical schools means there is less likelihood of focusing on issues relating to women's health, said ELAM's program director, Page S. Morahan, associate provost for faculty development at Allegheny University of the Health Sciences.

Three awarded Ford fellowships

Three UCSF students are among the 111 minority scholars who have been awarded 1998 Ford Foundation fellowships.

Paul Joseph DiGregorio, who studies cell biology, and Frederick Lee Moore, who studies genetics, were awarded pre-doctoral fellowships. Rocio de Lourdes Marchese was awarded a dissertation fellowship for his work in immunology.

The fellowship programs, administered by the National Research Council — the principal operating arm of the National Academy of Sciences and the National Academy of Engineering — seek to increase the presence of underrepresented minority groups on the nation's college and university faculties.

Awards were given to 50 beginning graduate students, 33 students writing their dissertations, and 28 recent PhD recipients who participated in national competitions held last spring. More than 170 scholars in the sciences and humanities selected the award winners from about 1,000 applicants, based on merit and promise of future achievement. The evaluation panels are composed of faculty members from the nation's institutions of higher education as well as from industry and private research institutions.

This year's fellowship pool includes 54 African-Americans, 29 Mexican-Americans, 14 Puerto Ricans, nine Native American Indians, four Native Pacific Islanders, and one Native Alaskan.

PRIVATE SUPPORT

UCSF is pleased to acknowledge the following gifts/pledges of $25,000 or more from individuals, corporations and foundations received October 4-17, 1998.

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UCSF AIDS program ushers in new era

BY CORINNA KAARLELA

The UCSF AIDS clinical service, based at San Francisco General Hospital Medical Center (SFGHMC), changed its name to reflect a new era of care.

The new name of the comprehensive UCSF AIDS service is UCSF Positive Health Program.

"Our new name reflects the dramatic changes in our field and in the services we provide," says Paul Volberding, UCSF professor of medicine and oncology who directs the program. "Many people are living with HIV who don't have AIDS, and we also care for patients with cancer and blood disorders who don't have HIV. Our approach to all our patients is, indeed, very positive."

The program operates in partnership with the Community Health Network, San Francisco's integrated health care delivery system.

The program offers two outpatient units.

The outpatient service at San Francisco General is now called the Positive Health Practice at SFGHMC. The medical director is John Stansell, UCSF associate professor of medicine. Formerly known as Ward 86 or the UCSF/SFGH AIDS Clinic, this service is located at 995 Potrero, 6th floor.

The outpatient service at the medical center at UCSF, a part of UCSF Stanford Health Care, is now called the Positive Health Practice at UCSF. The newly named medical director is Amy Kindrick, UCSF assistant professor of medicine.

Located at 400 Parnassus, 4th Floor, this service previously was named the UCSF AIDS Clinic.

The renovation on the 6th Floor of Building 80 at SFGHMC represents a two-year, $200,000 makeover designed to improve the efficiency of outpatient care activities and to make the area more pleasant for all visitors and staff. Patient exam and treatment rooms were revamped; the floor plan was revised to create areas for lab tests and other specialized tasks and electrical and heating systems were upgraded.

A major addition to the floor is an information resource center for HIV/AIDS patients, cancer patients, and caretakers. Named the Constance B. Wofsy Educational Center, this special unit is equipped with print and video informational materials and a computer terminal for on-line searches. It honors the late UCSF researcher who was a leader in HIV/AIDS care from the early days of the epidemic.

Founded in 1983, the UCSF AIDS Program arose from the vision of three pioneers in AIDS treatment and research at SFGHMC: oncologists Volberding and Donald Abrams and the late Wofsy, an infectious disease specialist. Teaming with two nurses and a clerk, they opened the unit at SFGHMC at a time when few people had heard of AIDS. It was one of the first HIV/AIDS facilities in the nation.

The UCSF Positive Health Program team are, from left, Patty Dwyer, Until There's A Cure Foundation; Mera Granberg, SFGH Foundation; John Stansell, physician; Nadine Lurie Batya; Meg Newman, physician; Paul Volberding, physician, and Jeanette Kimili.

(USHC FROM PAGE 1)

the disorder with one minimally invasive surgical procedure instead of three to speed children's recovery time and decrease inpatient costs.

In another example, a coordinated UCSF Stanford Clinical Cancer Program has enabled patients who get their care at UCSF/Mount Zion Medical Center or at Stanford Hospital and Clinics to have access to 150 physicians that specialize in cancer care at UCSF and Stanford.

In the case of prostate cancer, faculty from various departments including urology, radiation oncology, medical oncology and radiology will work together in the new UCSF Stanford Prostate Diagnostic and Treatment Center. Initial plans call for all new patient cases to be presented at a weekly video-conference when physicians from both sites can discuss a treatment strategy. Other plans for the pilot program include having a central referral phone number and a management structure for scheduling appointments and follow-up care.

"It's exciting to be able to participate in creating a tangible result of the merger, and one that has such far-reaching clinical and public health potential," says Peter Carroll, UCSF's chair of urology. "I believe we will be creating a model of care that will improve both outcomes and quality of life for patients suffering from prostate disease, while at the same time contributing to the development of consensus regarding screening and treatment options."

Status report

Speaking at a Nov. 2 meeting at UCSF to discuss the first year and future challenges of UCSF Stanford, Kerr says the merged medical organization still faces the same complex fiscal challenges that drove the merger. UCSF Stanford must cope with significant limitations on public and private health care reimbursements, including $70 million in unreimbursed Medi-Cal costs last year alone. Medicare is also reducing financial support for teaching hospitals, according to Kerr.

"Considering the difficult health care environment in which public and private payors are feeling pressure to cut costs, we will need to continue improving efficiency," says Van Etten. "This will be critical in order to secure the resources to support both the expansion of patient programs and our teaching and training mission."

The organization also continues to work on challenges associated with implementing a new payroll system, operating a supply purchase and distribution system, managing about 1,000 leased UCSF employees and revamping the information system to be compliant with Year 2000 issues, Kerr says.

Steve Barclay, vice chancellor for administration and finance, says UCSF will partner with UCSF Stanford to devise a plan to address various information systems issues to improve technology "faster, cheaper and better with joint management."

UCSF STANFORD HEALTH CARE
GOALS FOR 1998-99

- Meet timeline to revamp information systems by Year 2000
- Achieve enterprisewide integration and standardization of clinical and financial systems
- Develop an enterprisewide quality and customer service initiative to focus on outcomes as well as improving patient services
- Develop a multi-year business plan
- Achieve financial targets.

While the UCSF and Stanford medical schools remain independent, UCSF Stanford draws on the clinical expertise of their faculties and provides support to their academic and research missions.

"One of the reasons we went into the merger is that we didn't want to be a victim of the marketplace," Boyden says. "We wanted to be driving what we were doing. The merger has helped us to achieve this."

But, she says, problems exist with the financial reporting system, managing the transition into a single clinical enterprise and communicating to middle management and staff. "They feel a little bit disenfranchised at times," Boyden says. "There is an 'us and them' sort of feeling that wasn't here before. I think we need to be cognizant of that and address it as we go forward."

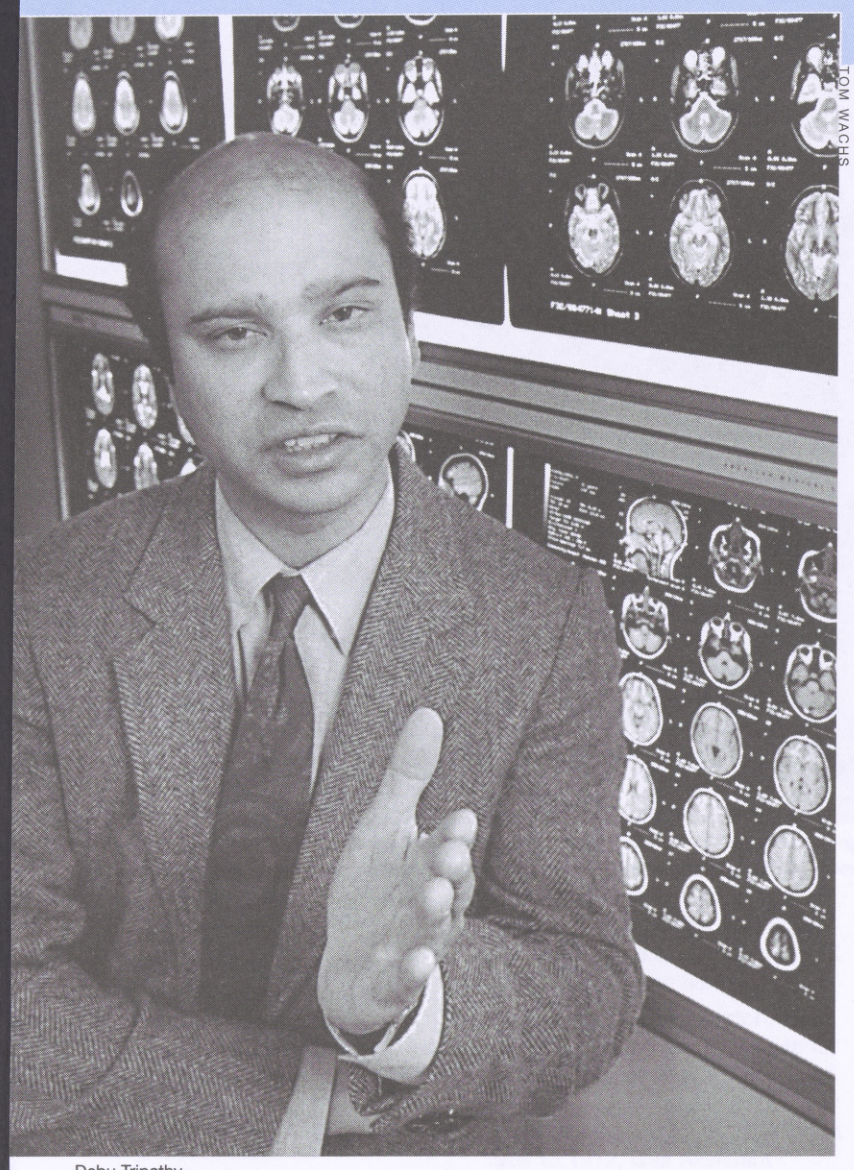
Says Haile Debas, dean of the School of Medicine and vice chancellor for medical affairs, "The merger has gone reasonably well considering the magnitude of the changes. My major concern has been the stress these changes have caused on our staff."

Indeed, at the same time the merger occurred, UCSF was tackling clinical issues related to the integration of the faculty practice, funds flow, physician compensation and information systems. UCSF Stanford continues to address these issues.

"The effects of these changes on the clinical departments have been considerable," Debas says. "Unfortunately, many in the faculty attribute these changes to the merger, when, in fact, they would have occurred without the merger."

Adds Bruce Schroffel, UCSF hospital director: "There is a propensity to blame everything on the merger. There were things that needed fixing before the merger. Overall, I think we're heading in the right direction. I have learned a lot from my colleagues at Stanford."

LISA CISNEROS, Newsbreak editor, and
DANIEL BERMAN, News director for UCSF Stanford Health Care



TOM WACHS

Debu Tripathy

Hormone therapy extends life for prostate cancer patients

Prostate cancer patients receiving radiotherapy who are at a high risk of dying of the disease have an increased survival rate if they take hormonal therapies for longer than average periods, according to a study conducted by a UCSF prostate cancer expert.

Mack Roach III, UCSF associate professor of radiation oncology and medicine, presented his findings Oct. 28 at the annual meeting of the American Society of Therapeutic Radiation Oncology (ASTRO).

"Our study showed a 20 percent increase in survival after eight years for high-risk prostate cancer patients who continued to receive hormonal therapy in conjunction with radiotherapy compared to those who received radiotherapy alone," Roach says. "This is the first study to suggest that some prostate cancer patients may need to take hormonal therapy for as long as breast cancer patients typically do in order to reach the maximum effect of the treatment."

He noted that prostate and breast cancer are similar diseases because both are hormone dependent. In prostate cancer, the male's androgens or sex hormones, such as testosterone, act as a "catalyst" in governing the functions of the prostate and prostate cancer cells. In animal models, depleting tumors of hormones has been shown to weaken cancer cells, making them more sensitive to radiation, Roach says.

During the study, researchers found that high-risk patients who received radiotherapy alone had a 34 percent chance of dying of prostate cancer after the first five years of treatment. In contrast, those who received hormonal therapy in conjunction with radiotherapy had a 19 percent chance of dying of the disease.

Prostate cancer patients frequently take hormone therapies for about four months. Recent American studies have administered the drug to men in clinical trials for two years, and in European studies, for three years.

UCSF takes first step to study Chinese medicine

UCSF researchers are taking a crucial first step to integrate traditional Chinese medicine, where effective, into the standard of care for breast cancer patients.

Researchers at UCSF are recruiting 60 patients for the first study in the US that will determine the feasibility of using Chinese herbal therapy to alleviate the side effects of chemotherapy in women with early stage breast cancer.

This study aims to scientifically evaluate the benefits of a Chinese herbal formula that is widely used by cancer patients receiving chemotherapy. The trial also will assess any toxicities associated with the use of the formula in conjunction with chemotherapy.

After conferring with many herbalists around the world, studying past clinical trials of herbal therapies, and reading textbooks on the subject, UCSF researchers developed a formula consisting of a range of herbs that they hope will alleviate multiple side effects of chemotherapy. The formula contains 21 herbs and has received an Investigational New Drug (IND) license from the Food and Drug Administration that is necessary to conduct a clinical trial.

"Ultimately, we would like to develop a model in which we integrate the parts of herbal therapies that are safe and effective with those that we know are effective in standard conventional therapy, such as chemotherapy," says Debu Tripathy, UCSF associate professor of medicine, director of clinical research at the UCSF Carol Franc Buck Breast Care Center and principal investigator of the study.

In the US, most women are diagnosed with breast cancer at an early stage. Chemotherapy is being recommended more frequently as studies now show a clear reduction in the risk of cancer spread, Tripathy says. But the treatment is often accompanied by side effects including fatigue, nausea, vomiting, lowered white blood cell counts, hair loss, psychological distress and a decrease in quality of life, he adds.

In the San Francisco Bay Area alone, it's estimated that 64 percent of women with breast cancer use at least one type of complementary therapy to reduce the side effects of chemotherapy or improve their quality of life.

Because so many of his patients use alternative therapies, Tripathy says he feels it is his duty and responsibility to learn more about such treatments by testing them in clinical trials.

He designed a study that will provide breast cancer patients access to herbal therapy who typically would not receive a prescription for this treatment from their oncologists.

However, in order for the trial to be effective, he says, participants will be randomized to receive either the herbal formula or a placebo so that researchers can discern which side effects, if any, are caused by the herbal therapy versus chemotherapy. This will enable researchers to get a better idea of the herbal therapy's benefits in terms of a patient's lowered side effects.

Participants will begin taking the Chinese herbal formula, which comes in powder form and is mixed with warm water and sipped like tea, two weeks before their first chemotherapy session. Each patient's progress will be followed closely over a 180-day period by a research team including a medical oncologist, epidemiologist and licensed herbalist/acupuncturist. Patients will also complete questionnaires throughout the 12- to 18-month study regarding their overall health, sense of well being, and experience with the herbal formula.

The Arkay Foundation, a nonprofit organization interested in women's health and alternative therapies, helped to fund the clinical trial. It has been approved by UCSF's Cancer Center Scientific Protocol Review Committee and the Committee of Human Research.

For more information or to participate in the study, please call Erika Leemann at 885-7328 or by email at erika_leemann@quickmail.ucsf.edu

Cancer Care

STORIES BY ABBY SINNOTT

CHRIS T. ANDERSON

Janet Bamberger, breast cancer survivor, looks at one of the items for sale in the Friend to Friend boutique. Bamberger is the shop's flower designer.

Unique boutique offers hope

A new boutique at the UCSF Cancer Center offers more than items created for and by cancer patients, it gives people living with cancer a new place to find support, comfort and hope.

The Friend to Friend boutique, the only one of its kind in the Bay Area, will sell merchandise, such as wigs, special cosmetics and prostheses, designed exclusively for people who are battling cancer, as well as novelty items, fresh flowers and greeting cards. Private fitting rooms are available where customers can receive make-up consultations and help selecting a prosthesis. Although some major department stores sell these items, Friend to Friend offers customers privacy, comfort and understanding that isn't always available at other retail outlets.

"Most of the people who are volunteering at the store have cancer or are cancer survivors," says Chris Wilhite, the store's manager and a breast cancer survivor herself. "So when you walk into the boutique, you immediately feel tremendous love and caring. This store is about living in hope, not about dwelling in death."

While assisting with the development and management of the store, Wilhite says she's glad to finally have a chance to give back to the community of cancer patients and physicians who helped her reach recovery after experiencing cancer a year ago.

"We are very excited about being able to offer this warm and nurturing space — the first store of its kind in Northern California — to the entire community," says Cathryn Sampson Hilliard, president of the UCSF/Mount Zion Auxiliary. "The boutique is designed to make patients with cancer feel good about themselves as well as raise the spirits of their family and friends."

Friend to Friend even has a "Pass the Hat" program where women who have had cancer pass along their hats to others facing the disease. Attached to each hat is a message of encouragement from survivor to fighter.

The boutique was named in honor of Ida Friend, who died of ovarian cancer two years ago. Her husband, Joseph Friend, donated millions of dollars to the UCSF Cancer Center to help establish a new resource center including a healing garden, café, resource library for cancer patients, and the boutique, which is the first component of the complex to open. The rest of the center is scheduled to open in December.

Friend to Friend is located at the UCSF Cancer Center at Mount Zion Medical Center, 2356 Sutter St. Regular business hours will be from 9:30 a.m.-5:30 p.m., Monday through Friday. For more information, call 353-7776.

Ultrasound probe detects uterine cancer

Researchers at UCSF report that a painless, non-invasive ultrasound procedure is able to detect more than 95 percent of uterine cancer and disease in postmenopausal women.

The test, called an endovaginal ultrasound (EVUS), uses an ultrasound probe that is placed directly into the vagina to obtain a measurement of the uterine lining and detailed images of the uterus.

Researchers found that EVUS was able to identify 96 percent of uterine cancer and 92 percent of uterine disease in postmenopausal women who experience abnormal vaginal bleeding, an indicator of uterine problems.

"This is an excellent test in postmenopausal women who have vaginal bleeding, and it can accurately exclude significant underlying abnormalities, such as uterine cancer," says Rebecca Smith-Bindman, UCSF assistant professor of radiology. "If a woman's ultrasound results are normal, meaning that she has a thin uterine lining, then there is no need for subsequent invasive testing with a uterine biopsy."

Although many gynecologists are knowledgeable about and may use EVUS in postmenopausal women with vaginal bleeding, few primary care physicians and generalists rely on the test because, until now, there has been a lack of sufficient data proving its efficacy. Smith-Bindman emphasizes that physicians need to be thoroughly trained to perform an EVUS examination.

Most postmenopausal women with abnormal vaginal bleeding must undergo a uterine biopsy to determine whether they have uterine disease or cancer, the fourth most common malignancy in women in the US, affecting more than 36,000 women and causing 6,300 deaths annually.

However, a standard biopsy, in which part of a woman's uterine tissue is removed to obtain a diagnosis, is uncomfortable, non-diagnostic, or cannot be performed in 2 to 28 percent of attempts, Smith-Bindman says.

Conversely, an ultrasound test is painless, well tolerated, cost-effective, and has a higher accuracy rate for detecting uterine cancer than a biopsy because ultrasound imaging allows visualization of the entire uterine cavity, whereas the latter relies on blind sampling of the uterine tissue, she says. In addition, EVUS eliminates the need for multiple unnecessary biopsies in postmenopausal women who continue to bleed although they have no serious uterine problems.

Medical Center Way closes for week

Beginning Monday, Nov. 16 at 6 a.m., Medical Center Way will be closed for a week, ending Sunday, Nov. 22 at 5 p.m.

The closure, above the foot of the Surge Lot stairs and lower animal care driveway, is necessary as workers install new electronic systems now required for underground tanks and equipment.

Road closure signs will be posted and will be removed when the road is open again. For more information, call the UCSF Utilities Plant Hotline at 502-7287.

Nominations sought for MLK awards

Nominations are now being sought for the Dr. Martin Luther King Jr. Awards to be given during MLK Week in January. Three Awards are given annually — one each to a faculty/ academic member, a staff member and a student. The selection criteria are as follows:

Extraordinary leadership in developing and implementing programs or activities at UCSF that have:

- furthered mutual understanding for the cultural and ethnic diversity;
- advanced the recruitment and hiring and admission of underrepresented ethnic groups;
- promoted the retention and career mentoring of underrepresented ethnic groups;
- assisted in ensuring an equal opportunity for career advancement for underrepresented ethnic groups and
- encouraged the participation of traditionally underrepresented groups in campus committees, activities and events.

Any member of the campus community may nominate someone. For more information or for nomination forms, call the Affirmative Action/Equal Opportunity/Diversity Office at 476-4752. Nomination forms are also available at the Office of the Chancellor, S 126, and at the Moffitt Hospital Information Desk.

Nominations must be returned to the Affirmative Action/Equal Opportunity/Diversity Office, Box 0988, 145 Irving Street, by 5 p.m., Friday, Nov. 20, 1998.

Grants available for international study

The National Security Education Program (NSEP) offers fellowships to graduate and professional school students to master their understanding of languages and cultures not commonly studied in the US.

Fellowship are highly flexible and students design a program that meets their educational requirements and interests. Intensive language study must be the major component of the fellowship, but proposals may include research or clinical experience.

Fellowships will support projects lasting a minimum of one academic semester and a maximum of 24 months. Programs may begin no earlier than fall 1999 and no later than summer 2000.

NSEP encourages applicants from students in sciences and other fields that traditionally have not had an international focus. The deadline to apply is Jan. 15.

For applications, see the NSEP website at www.aed.org/nsep or visit the UCSF International Academic Programs at 145 Irving St., Suite 103, or call 502-2962.

Exchange group looks for members

The Exchange program at UCSF is recruiting members to join the support, social and philanthropic organization.

Current members include the spouses, partners and families of UCSF interns, residents, fellows and postdoctoral scholars.

A registered campus organization, the Exchange offers a number of ways to get acquainted with others in campus community, including groups for gourmet cooking and crafts, and offers services such as a baby-sitting cooperative and a Loan Closet, which loans household items to members.

For more information, call Heidi Rochau-Trumpp at 753-0215 or Michele Porta, president, at 661-6701.

Lucy Crain

Pediatrician enjoys teaching children, parents simple truths of life

BY JANET BASU

Whenever she gets a chance, pediatrician Lucy Crain sits down and reads to a child. During checkups, she asks her patients' parents about time spent reading and singing to their children. She reminds them that these are good ways to teach the simple truths of how to get along in the world. "Parents listen to pediatricians," Crain says. "We have the privilege to help mold the development of future generations."

That idea — that pediatricians have the opportunity and the obligation to influence the way children are cared for, beyond the clinical tasks of "doctoring" — has shaped much of Crain's career. A professor of pediatrics in the division of adolescent medicine at UCSF, she is director of the outpatient Pediatric Disabilities and Down Syndrome clinics for Lucile Packard Children's Health Services at UCSF. She also is a leader on child advocacy issues, and has worked for many years on local and state legislation via the Northern California chapter of the American Academy of Pediatrics (AAP).

She is the 1997-2000 chair of the AAP's ninth regional district, and a member of the AAP board of directors. When the AAP held its annual meeting in San Francisco last month, Crain was one of the hosts to 10,000 pediatricians and other pediatric specialists from around the world, representing primary care and more than 40 medical subspecialties.

"The AAP is unique among the medical professional organizations," Crain says. "We probably spend more time advocating for our patients than we do on advocacy for our own profession." In California, for example, she says that AAP, working with other child advocacy groups, deserves credit for laws governing bicycle helmets and swimming pool safety, and for the Stop Tobacco Access for Kids Enforcement act.

One of Crain's chief interests is violence prevention. "As pediatricians, we have a responsibility not only to decrease or eliminate access to guns by children but to work for a whole attitude change on society's approach to violence. Children should not have access to weapons of destruction and murder. But, in addition, they and their parents and communities need to learn new attitudes to conflict resolution. In treating violence, prevention is the name of the game."

Another major legislative issue is access to health insurance coverage. As many as 1.4 million California children are uninsured but 500,000 of them are thought to be eligible for insurance through the new Healthy Families Program, California's program under the federal Title XXI. However, Crain says that Californians are not being made aware of the opportunity.

"California children stand to lose $1.2 billion in matching funds if the Healthy Families Program is not successful in outreach and enrollment of the children and procuring access to pediatricians and other primary care providers," Crain says. There also are health coverage problems with the advanced new vaccines for children: pediatricians consider the vaccines essential, yet they are far too expensive for most young families, and many health plans will not adequately pay for them.

For most pediatricians, however, the real opportunity to influence children's lives comes not in legislation but in everyday medical practice. Crain advocates "anticipatory guidance" — offering advice on health and well-being that fits the child's stage of development, and looks ahead to the stages just about to come.

This approach to children's health is not necessarily compatible with managed care, Crain says. Pediatricians — already among the lowest paid physicians — increasingly are being pressured to spend less time with their patients. Treatments for children with special needs — like a 10-year-old who has outgrown the wheelchair made for her when she was six — increasingly are being denied.

"The managed care industry is not child-friendly for the most part," Crain says. "I think it's too easy for people to understand that prevention equals vaccination, but not to understand anticipatory guidance. The battles on this front are ongoing, and unfortunately, the children are the pawns."

(REACTION FROM PAGE 1)

centrist government dedicated to education and diversity," says Haile Debas, dean of the School of Medicine and vice chancellor of medical affairs. "The passage of Proposition 1A was especially reassuring. I believe that issues of affirmative action and diversity will, from here on, be framed in a less ideological and more sensitive manner."

As ex-officio members of the UC Board of Regents, both Davis and Eastin have supported affirmative action, domestic partner benefits and initiatives aimed at improving student access to affordable, quality education.

"I'm excited," says Michael Adams, director of Affirmative Action/Equal Opportunity/ Diversity. "I think it's a great victory for diversity and bringing people together. I know Davis tried hard to fight the extreme in the anti-affirmative action movement. I expect we'll see a shift."

Some of those interviewed see the Democratic landslide in offices across the state as a sign that Californians are concerned about issues that affect their day-to-day lives.

"Davis seems to be very supportive of higher education and equal rights for all people," says Paul Riofski, coordinator of the Office of Graduate Affairs, School of Dentistry. "I think he will be a lot more inclusive than Pete Wilson."

"I am profoundly grateful that Gray Davis was elected governor," says Tory Becker, a student nurse practitioner of occupational health. "While I had trouble voting for Gray Davis because of his support of the death penalty – I am actively opposed to that – I like that he is pro-choice and is supportive of working people."

Hurricane Mitch survivor asks for relief assistance

A group of UCSF Stanford Health Care professionals who went to Nicaragua on a volunteer mission survived the fury of Hurricane Mitch, which has killed an estimated 11,000 people throughout Central America.

James Ressler, a senior physician assistant in the department of orthopedic surgery, was one of eight health care workers from the medical center at UCSF who were in Central America offering free medical services when the deluge of rain cut the humanitarian mission short.

The health care team had to be rescued in stages by Nicaraguan helicopters — the only way to escape the relentless floods and landslides that followed Hurricane Mitch.

Ressler, who took the trip as part of Operation Rainbow, an international effort to provide medical services to children and to educate physicians in developing countries, arrived safely to his San Francisco home last Wednesday. He is making an urgent appeal to the campus community to donate much needed medical supplies, such as IV fluids and antibiotics, as well as food and water.

Jim Ressler took this photograph in Esteli, Nicaragua on Oct. 26. A river overflowed, wiping out houses and anything else in its path and turning this village road into an estuary.

"The numbers of people affected by the disaster is staggering," says Ressler, who said he never feared for his life. "The area has been decimated and the infrastructure has been completely destroyed."

While countries, including the US, have since donated helicopters to add to Nicaragua's rescue efforts, tens of thousands of people are in need of food, water and medicine.

"Of the 30,000 or 35,000 inhabitants of Esteli, 5,500 had nothing and were put into shelters," Ressler says. "They had no pots or propane to boil water, so many people had to drink rain water."

The danger will continue as survivors face serious threats from infectious diseases of all kinds, Ressler says.

"The wrath of wet weather puts Nicaraguans at risk for cholera, malaria and Typhus, among other diseases. And as such, they will need lots of IV fluid hydration and antibiotics," he says.

Arriving in the nation's capital of Managua on Oct. 24, Ressler and colleagues traveled three hours north the following day to work in a government hospital in the central town of Esteli. They were able to spend two days performing operations to correct congenital defects, such as club foot, before the storm became a factor.

"The third day of surgery was canceled because a national emergency was declared," says Ressler. "The people there are very loving and resourceful so they understood the situation."

And as dramatic as his second trip to Nicaragua was, it will not be Ressler's last. "Everyone felt that we would be able to go back there in six months to finish the job."

Monique Cesna, a nurse, was in Honduras during the hurricane as a volunteer for Interplast, an international organization that provides reconstructive surgeries to children with cleft lips, cleft palates and other debilitating birth defects. Her group left the country just in the nick of time, taking the last flight out of San Pedro Sula airport, arriving back in San Francisco on Oct. 29.

"We were fortunate to get out when we did," Cesna said. "The airport we flew out of is now ten feet under water."

Although they had to leave abruptly, the doctors and nurses on the Interplast team managed to complete 50 surgeries in the five days they were there. They plan to return to Honduras next year, or earlier, depending on the need, Cesna said.

LISA CISNEROS, Newsbreak editor, and
PAULA MURPHY, Daybreak editor

How to Help

1 Oscar Garcia, a native of Nicaragua who is a registered respiratory therapist at the UCSF Medical Center, is coordinating the relief effort on campus to provide basic supplies and over-the-counter medicines.

Garcia has set up a collection point for emergency relief materials in the Respiratory Care Service Office, Room M 69 in the basement of Moffitt hospital. A drop-off point has also been established at UCSF/Mount Zion, Room 704.

He's looking for non-perishable food, including baby formula and dry milk, and drugs such as Tylenol and aspirin. Collected materials have already been airlifted, courtesy of La Taca Airlines, to Honduras and Nicaragua. Garcia, who will be collecting goods through Friday, Nov. 20, will send the next shipment to Guatemala.

2 As part of the UCSF and UCSF Stanford Charitable Giving Campaign, which began this week, financial donations can be made to support the relief effort. Under Section "C" on the Charitable Giving form, write "American Red Cross-Hurricane Relief." On the return envelope, write "Hurricane Relief" and the form will be processed immediately.

3 UCSF and Airborne Express have joined forces to send supplies to Central America. Boxes and containers are being placed at various UCSF locations. For questions regarding the Charitable Giving Campaign or the UCSF/Airborne Express relief effort, call Katherine Riordan at 476-0729.

Breakthrough in understanding the biology of fat

Scientists discover gene for key enzyme

BY CORINNA KAARLELA

Not only do Americans consume a lot of fat, they are consumed by how to control it.

Now a research team led by scientists at the Gladstone Institute of Cardiovascular Disease and UCSF has discovered a major piece in the puzzle of how our bodies build and regulate fat.

The researchers have found a gene that encodes DGAT, a key enzyme in fat production, in a study published in the Oct. 27 issue of The Proceedings of the National Academy of Sciences USA.

Known officially as acyl CoA:diacylglycerol acyltransferase, the DGAT enzyme joins other smaller molecules to produce, or synthesize, a specific group of fats called triglycerides. Triglycerides are one of the major lipids (fats) found in the bloodstream, and they constitute more than 95 percent of the fat stored in the adipose (fat) tissue of mammals, thereby serving as the major source of stored energy.

"This finding has implications for many aspects of biology," says Robert V. Farese Jr., Gladstone scientist and UCSF assistant professor of medicine. "Identifying a gene encoding DGAT gives us a valuable tool to evaluate this enzyme and to explore triglyceride synthesis as it relates to human energy cycles, obesity, and cardiovascular disease. The finding also may have implications for potential development of drug therapies aimed at lowering triglyceride levels or treating obesity."

Because of its role in fat synthesis and energy storage, DGAT is thought to be a major player in the absorption of fats in the intestine, regulation of triglyceride concentrations in blood plasma, fat storage in fat cells, energy metabolism in muscle cells, and triglyceride synthesis involved in milk and egg production, according to Farese.

"In future research efforts we want to focus on determining the role that DGAT plays in these processes in mammals," he says.

DGAT also plays an important role in the synthesis of seed oils, such as canola oil, in plants, so a greater understanding of the enzyme has potential implications in agricultural science, he adds.

Although scientists have known that this important enzyme existed for several decades, DGAT proved difficult to isolate in its pure form because it is a protein that normally is associated with membranes and resists being pulled away from the lipid-rich membrane environment, Farese says.

He and his colleagues took advantage of computer-based searching to "find" DGAT. The team used the known DNA sequence of a related enzyme — called ACAT — involved in cholesterol metabolism to screen computer databases containing snippets of human and mouse genes.

"Serendipitously, we found a 'hit' for a sequence from a gene that appeared to be a 'cousin' of the ACAT gene. Then our group, led by Sylvaine Cases, went on to isolate the whole gene for this sequence from mouse tissue and to determine that it coded for a DGAT enzyme," Farese explains.

The researchers also were able to use the newly discovered DNA sequence to learn about DGAT. For example, they found large amounts of DGAT gene expression in the intestine and in fat tissue — indicating that these mouse tissues are where significant amounts of DGAT are made. "These sites are consistent with a role for DGAT in fat metabolism," said Cases, a postdoctoral fellow who is first author of the study.

The research was supported by the J. David Gladstone Institutes, National Institutes of Health, American Heart Association, and Department of Veterans Affairs.

calendar

Nov. 14-27, 1998

14 saturday

COMMUNICATION WORKSHOP: Sharon Ellison presents a workshop on non-defensive communication, 9:30 a.m.-4:30 p.m., C 130, Parnassus. Fee. For more information, call 476-5222.

BREAST CARE SYMPOSIUM: The UCSF Breast Care Center and the Cancer Center Breast program hosts a half-day symposium, 1 p.m., Nikko Hotel, San Francisco. Hear the latest data on hormonal therapy for prevention and therapy for breast cancer. Speakers include national experts, including UCSF's Debu Tripathy. A limited supply of free passes is available. For more information, call 476-5463.

ORCHESTRA CONCERT: The UCSF Orchestra will perform, under the new musical director Stephen Paulson, 8 p.m., St. Gregory Nyssen Episcopal Church, 500 DeHaro St., San Francisco.

15 sunday

ORCHESTRA CONCERT: The UCSF Orchestra will perform works by Bach, Barber and Tchaikovsky, 2 p.m., Millberry Gym, Parnassus.

16 monday

AGING FORUM: The Northern California Cancer Center presents *Aging in the New Millennium,* 9:30-11:30 a.m., Ft. Mason Conference Center, San Francisco. Topics include gender differences in old age and managing health care problems. Fee. Limited seating; pre-registration suggested. Call 510/429-2504.

BENEFITS FAIR: The UCSF Benefits Office staff will be available to answer any employee questions regarding open enrollment, noon- 1 p.m., SFGHMC, Carr Auditorium. For more information, call 476-4741 or visit the UC benefits plan website at www.ucop.edu/bencom.

ON SUBSTANCE ABUSE: The San Francisco Treatment Research Center (TRC) presents *Bridging the Gap between Drug Abuse Treatment and Research,* noon-4:30 p.m., Laurel Heights Conference Center. Speakers include Jack Blaine, chief, treatment research branch, National Institute of Drug Abuse and H. Westley Clark, director, Center for Substance Abuse Treatment. This event is free, but pre-registration is required. Call 206-3971.

NOON LECTURE: Jewelle Gomez, author and poet, presents *Don't Explain,* noon-1 p.m., book signing, 1-1:30 p.m., Toland Hall. Gomez will read from her new collection of work. Sponsored by the Center for Gender Equity. For more information, call 502-5593.

HEALTH POLICY SEMINAR: Ed Yelin presents *Changes in the Contemporary Labor Market: Implications for Health,* noon-1:30 p.m., Seminar Rm., 1388 Sutter St., 11th Flr. Sponsored by the Institute for Health Policy Studies and the Institute for Health & Aging.

FOR YOUR EYES ONLY: Richard Abbott, professor, clinical ophthalmology, presents *Better Vision Now,* 6 p.m., Beckman Vision Center, 8 Kirkham St. Hear about new surgery options for the correction of nearsightedness and astigmatism. Free. Call 476-5021.

17 tuesday

JEWELRY SALE: The UCSF Hospital's Auxiliary hosts semi-annual fine jewelry sale, 9:30 a.m.-5 p.m., MedSci lobby, Parnassus. This event benefits the patient amenities program at UCSF Medical Center.

BROWN BAG LECTURE: Gary M. Abrams, chief of neurology, director of rehabilitation, UCSF/Mount Zion, associate professor, clinical neurology, UCSF Stanford Health Care and Pamela Jane Ney, director, post acute care services, present *Taking Stock of Stroke: What are your risks and what can you do to minimize them?,* noon-1 p.m., Mount Zion, Herbst Hall, 2nd Flr. Sponsored by Public Service Programs. Call 476-4394.

BOYER SEMINAR: Steve McKnight, department of biochemistry, University of Texas Southwestern Medical Center, presents *New PAS Domain Proteins: New Places and New Biology,* 4 p.m., HSW 301, Parnassus. This seminar is presented by the department of biochemistry & biophysics and sponsored by the Herbert W. Boyer Fund. For more information, call 476-4095.

BENEFITS FAIR: The UCSF Benefits Office staff is available to answer any questions regarding open enrollment, 5-6 p.m., S 214, Parnassus. For contact information, see Nov. 16 listing.

COMMUNITY FORUM: The UCSF AIDS Research Institute presents *Reflections: Science and Gay Men's Lives,* 7-9 p.m., Metropolitan Community Church, 150 Eureka St., San Francisco. Free. To RSVP, call 597-UCSF (8273) or email ari@psg.ucsf.edu.

18 wednesday

FOR GI FACULTY/FELLOWS: The GI Division Faculty and Fellows presents *AASLD Review,* 8-10 a.m., S 214, Parnassus.

JEWELRY SALE: See Nov. 17 listing.

TB SKIN TESTING WORKSHOP: The Francis J. Curry National Tuberculosis Center is offering a course on TB skin testing, 8:30 a.m.-12:30 p.m., 3180-18th St., San Francisco. This course is for nurses, health outreach workers, disease control investigators, and others who screen for tuberculosis. Enrollment is limited and pre-registration is required. For more information, call 502-4600.

BLOOD DRIVE: Donate blood, 10 a.m.-4 p.m., Mission Center Building. Fantastic raffle prizes! Call 476-6989.

ELDER CARE LECTURE SERIES: Patricia O'Healy, certified financial planner, presents *Financial Planning (or how not to break the bank!),* noon-1 p.m., Cole Hall. Sponsored by the UCSF Elder Care Referral Service and Crossroads Home Care and Hospice. To register, call Jane Mahakian at 502-8673.

BROWN BAG LECTURE: Gina M. Wade, assistant clinical professor, community based health systems, School of Nursing and Geri Collins-Bride, assistant clinical professor, mental health nursing, present *Webcare: Online Nursing and the Internet,* 12:10-1 p.m., HSW 300, Parnassus. Learn how to use the Internet to educate patients and their caregivers. Sponsored by Public Service Programs. Call 476-4394.

AROMATHERAPY & HERBS: Millberry Programs & Services presents Jeanne Rose, renowned speaker and author of *The Aromatherapy Book: Applications and Inhalation,* 6-9 p.m., MU Conference Center, Parnassus. For better health, learn about the power of aromatherapy, herbs, and natural remedies to add to your diet, enhance your self-care, and strengthen your immune system. Cost: $25/27/29. For more information, call 476-1115.

19 thursday

JEWELRY SALE: See Nov. 17 listing.

BROWN BAG LECTURE: Jason Lerner, senior physical therapist, UCSF Stanford Health Care, presents *Is Your Job a Pain in the Neck?,* noon-1 p.m., Mission Center, Board Rm., 6th Flr. Learn about the prevention and management of neck and upper extremity overuse, and how to make a less than ideal work situation work for you. Sponsored by Public Service Programs. Call 476-4394.

STUDENT ENRICHMENT SERIES: Terry Smith presents, noon, N 217, Parnassus. Co-sponsored by The Learning Skills Program at UCSF. For more information, call Maureen Conway at 502-2442.

MEDICAL GRAND ROUNDS: Eliseo Perez-Stable, professor, clinical medicine, division of general internal medicine, presents *Update in General Medicine,* noon-1 p.m., N 225, Parnassus. Sponsored by the department of medicine. For more information, call Edith Bucoy at 476-1528

BUILDING AWARENESS: Learn about the Feldenkrais Method, an innovative approach to developing awareness through movement, 1:10-2:10 p.m., MU Fitness Center, Parnassus. For more information, call 476-1115.

AIDS RESEARCH LECTURE SERIES: The AIDS Research Institute presents Steven E. Hyman, director, National Institute of Mental Health, NIH, who will speak, 3:30-4:30 p.m., Toland Hall. Hyman will discuss directions and trends for HIV science.

24 tuesday

BOYER SEMINAR: Eric R. Kandel, division of neurobiology & behavior, Howard Hughes Medical Institute, Columbia University, 4 p.m., HSW 301, Parnassus. This seminar is presented by the department of biochemistry & biophysics and sponsored by the Herbert W. Boyer Fund. For more information, call 476-4095.

25 wednesday

GI FELLOWS COURSE: Douglas Corley, GI Division, presents Non-Bleeding GI Emergencies, 8-9 a.m., S 214, Parnassus.

GI GRAND ROUNDS: Uma Mahadevan and Alex Monto, Fellows, GI Division, present Unknown Cases, 9-10 a.m., S 214, Parnassus.

MAMMOGRAPHY VAN: The UCSF van offers convenient breast cancer screening, 9 a.m.-3 p.m., UCSF/Lakeshore, 1501 Sloat Blvd. The exam costs $75 and takes about 20 minutes. Written or verbal approval from a doctor is required. Call 353-3825 for an appointment.

BROWN BAG LECTURE: Julie Matel, dietitian, UCSF Stanford Health Care, presents Low Fat Feasting for the Holidays, 12:10-1 p.m., HSW 300, Parnassus. Learn strategies for making healthier food choices and avoiding weight gain during the holiday season. Sponsored by Public Service Programs. Call 476-4394.

26 thursday

HAPPY THANKSGIVING!!

UCSF HOLIDAY

LISA CISNEROS

UCSF's annual holiday crafts faire is set for Thursday, Dec. 3. At last year's event, shoppers had a chance to buy handmade woolens by Janet Molinari, a program administrator in the anesthesia department. See upcoming events for details on this year's fair.

upcoming events

The search for an AIDS vaccine

To commemorate World AIDS Day on Tuesday, Dec. 1, the UCSF AIDS Research Institute presents *On the Road to an AIDS Vaccine,* from 2 to 5 p.m., in Cole Hall on the Parnassus campus. Neal Nathanson, director of the National Institutes of Health's Office of AIDS Research is the keynote speaker. A panel, moderated by AIDS pioneer Jay Levy, UCSF professor of medicine, will address the issues presented for the search for an AIDS vaccine. This forum is free, but RSVP to 597-UCSF or email ARI@psg.ucsf.edu. A reception will follow from 5-6 p.m. For more information, visit the website at http://hivinsite.ucsf.edu/ari/

Holiday crafts faire

EMPACT! Presents invites the campus community to the Ninth Annual Holiday Crafts Faire, on Thursday, Dec. 3, from 8 a.m. to 4 p.m., Millberry Gym and Conference Center, Parnassus.

Brimming with handmade crafts created by talented UCSF employees and community artists, the fair ushers in the gift-giving season. This is a chance to find many one-of-a-kind treasures for friends and loved ones.

Memory and aging

The UCSF/Mount Zion Center on Aging sponsors a half-day workshop, *Memory Loss and Aging: Normal Loss or Alzheimer's Disease?,* on Saturday, Dec. 5, from 8:30 a.m. to 12:30 p.m., Laurel Heights Conference Center, 3333 California St.

This workshop will focus on the effects of aging on memory, tips on keeping mentally fit, and the latest advances in the management of Alzheimer's disease. The workshop is free, but pre-registration is required as seating is limited. For more information, call 750-5342.

Lactation educator training program

UCLA Extension's acclaimed Lactation Educator Training Program, designed to prepare health professionals and other interested persons to be lactation educators, will be offered from Dec. 8 to 12 at the Radisson Hotel Berkeley Marina, 200 Marina Blvd., Berkeley.

Serving as course instructors at all venues are two of the leading experts and pioneers in the field — Ida Bird, assistant clinical professor at the UCLA School of Nursing, and Sandra Steffes, certified childbirth educator and early parenting consultant in private practice. Joining them on this five-day program, which runs from 8:30 a.m. to 5 p.m., are a staff of medical doctors and nurses.

For more information, free brochure or to enroll, contact Health Sciences, UCLA Extension, 310/825-9187. Online enrollment and additional information can be found on UCLA Extension's website [http://www.unex.ucla.edu/healthsci/lactate.htm].